

**Carnegie Public Library
300 West Main Street
Washington, IN 47501
812-254-4586**

APPLICATION FOR EMPLOYMENT

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

PLEASE COMPLETE PAGES 1-4.

DATE _____

Name _____
Last First Middle Maiden

Present address _____
Number Street City State Zip

Telephone () _____ Social Security No. _____ - _____ - _____

If less than 18 years of age, can you provide required proof of eligibility to work? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

*You will be required to show proof of citizenship or immigration status upon employment.

Position applied for (1) _____ Days/hours available to work
and salary desired (2) _____
(Be specific) No Pref _____ Thur _____
Mon _____ Fri _____
Tue _____ Sat _____
Wed _____ Sun _____

How many hours can you work weekly? _____ Can you work nights? _____

Employment desired ☐ FULL-TIME ONLY ☐ PART-TIME ONLY ☐ FULL- OR PART-TIME

On what date are you available to begin work? _____

Can you travel if this position requires it? _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? ☐ No ☐ Yes

*Conviction will not necessarily disqualify an applicant from employment.

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

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DO YOU HAVE A DRIVER'S LICENSE? ☐ Yes ☐ No

Driver's license
number _____ State of issue _____ ☐ Operator ☐ Commercial (CDL) ☐ Chauffeur
Expiration date _____

Please list two PERSONAL references:

Name _____

Name _____

Position _____

Position _____

Company _____

Company _____

Address _____

Address _____

Telephone () _____

Telephone () _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Answer the questions below and please use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

Check skills and equipment operated:

Typewriter _____ Computer _____ Microsoft Word _____ Microsoft Access _____ Microsoft Excel _____

Microsoft Publisher _____ Internet _____ Adding Machine _____ Fax Machine _____ Other _____

Indicate any language you can speak, read, or write. Also indicate the fluency in which you do so:

Other qualifications:

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Work Experience Please list your work experience beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of Employer, address, phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

May we contact your present employer? ☐ Yes ☐ No

Did you complete this application yourself ☐ Yes ☐ No

If not, who did? _____

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Carnegie Public Library, I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Carnegie Public Library practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Carnegie Public Library or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Director of the Carnegie Public Library. Both the undersigned and Carnegie Public Library may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Carnegie Public Library may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Carnegie Public Library permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Carnegie Public Library from any liability as a result of such contract.

I further understand that my employment with the Carnegie Public Library shall be probationary for a period of six (6) months, and further that at any time during the probationary period or thereafter, my employment relation with the Carnegie Public Library is terminable at will for any reason by either party.

Signature of applicant _____ **Date:** _____

The Carnegie Public Library is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with the Carnegie Public Library depends solely on your qualifications.

Thank you for completing this application form and for your interest in our institution.

